

Standard Aftercare Definition & Service Description

I. Family First Prevention Services Act (FFPSA) & Qualified Residential Treatment Programs (QRTPs)

The federal law, Family First Prevention Services Act was adopted in 2018 and based on several core principles. Included in these core principles, is mandating policies that help preserve and maintain families while creating pathways to higher quality residential treatment services for children that are unable to remain with their family or a foster care family. This includes restricting the use of Title IV-E financing for congregate care placements with the goal of keeping children in family-like settings when possible. The FFPSA limited congregate care providers to federal funding for the first two weeks of a child's care. Congregate care providers were required to become QRTPs to qualify for additional federal funding. To receive designation as a QRTP, service providers must meet multiple criteria, including provision of discharge planning and family-based aftercare supports for at least 6 months post-discharge from residential treatment.

II. Aftercare Services Overview

Aftercare Services refer to support services provided to children that are transitioning from residential treatment programs into family or family-like living situations. DCS aims to enhance outcomes for these children by continuing to support them for at least six months following their transition out of congregate care. Aftercare Services are a vital part of the step-down process, which is a method for decreasing the level of services for a child in out-of-home care.

Aftercare Services support both the child and their family and can include a wide range of offerings. Aftercare Services for youth may include, but are not limited to:

- Coordination of the youth's stakeholders and collateral contacts (i.e. probation officer, family, therapist, etc.)
- Connection with education and/or career resources
- Connection with social and community resources
- Management of behavioral, mental, and physical health services
- Support in development of familial and peer relationships
- Connection with skills-building resources (i.e. courses on financial literacy, career skills, life skills)
- Connection with relevant support groups and/or treatment services
- Connection to transportation resources

Aftercare Services should be provided in a culturally and linguistically sensitive manner. Aftercare Services are provided based on a youth's specific needs and level of care, and may be required by youth and/or their families outside of normal business hours. Services should include both the child and their family with the child playing an active role in their Aftercare.

In accordance with FFPSA, Aftercare Services should be provided for at least six months post-discharge to children exiting QRTPs.

III. Standard Aftercare Services in Indiana

DCS, in collaboration with a provider workgroup, developed a definition of Standard Aftercare Services that will be expected of all QRTPs in Indiana. These minimum expectations for Standard Aftercare Service provision include:

- Collaboration with the Family Care Manager (FCM), Probation Officer (PO), and other stakeholders by teaming every 30 days post-discharge for at least 6 months.
- Provision of outcome data on each aftercare case (*Specifics are still being determined.*)
- Prior to the youth's departure from the QRTP to a step-down placement, utilization of transition youth visits with the family treatment team, the youth's parents and/or caregivers, and the youth to identify and discuss the youth's strengths and needs from a holistic perspective.
- Assistance with school enrollment (if applicable). Prior to discharge from the QRTP the child must be enrolled in school - or alternative education program – if school is in session. If any barriers arise, QRTPs should engage the Education Liaison.
- Development and maintenance of an educational passport, including, but not limited to, a child's:
 - Immunization records
 - Individualized Education Plan (IEP)
 - Education specific testing
 - Transcripts
- Assistance with identification, facilitation and support of positive, normative, age-appropriate, pro-social relationships within the child's community. Pro-social peers are individuals within two years of child's age who have not had involvement in DCS, Probation, etc.
- Organization and facilitation of the transition from the QRTP to other medical and mental health providers (if applicable) in the child's community. This includes collaboration to ensure that there is no lapse in medication, if applicable.
- Assessment, assistance, and support of the needs of parents and/or caregivers and family while incorporating family feedback. Examples of support include, but are not limited to:
 - Parenting skills courses
 - Family therapy
 - Structured planning
- Consistent and ongoing engagement with youth and families with a minimum of four attempts per month through various forms of communication (mailing, home phone, cell phone, email, text, and face-to-face).

IV. Documentation of Aftercare Services

Monthly documentation of the Aftercare Services provided will be a requirement.

Each Residential Provider is allowed to create their own Aftercare Monthly Report template. The Aftercare Monthly Report must address items listed in Section III above along with the following:

- Date of the monthly Child and Family Team Meeting initiated by FCM/PO or QRTP
- Services Provided to the Child/Family
- Plan for the following month
- Plans for discharging from Aftercare

For additional guidance and best practice information please see the QRTP Aftercare Addendum posted on the DCS Placement webpage.